WHEN RECORDED RETURN TO:

CHICAGO TITLE COMPANY



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Chicago Title Insurance Company

425 Commercial Street - Mount Vernon, Washington 98273 620005709 DOCUMENT TITLE(s) POWER OF ATTORNEY 1. 2. 3. Additional numbers on page GRANTOR(s): 1. SHAREE E. FISH 2. 3. Additional names on page _____ _ of the document GRANTEE(s): 1. RACHEL JOHNSON 2. 3. Additional names on page ___ ABBREVIATED LEGAL DESCRIPTION: LOT 27, CRANBERRY HEIGHTS PHASE II Complete legal description is on page _____ 2 ___ of the document ASSESSOR'S PROPERTY TAX PARCEL ACCOUNT NUMBER(s): P113568 (sign only if applicable) I am requesting an emergency nonstandard recording for an additional fee as provided in RCW 36.18,010. I understand that the recording processing requirements may cover up or otherwise obscure some part of the text of the original document. Signature

This cover sheet is for the County Recorder's indexing purposes only.

The Recorder will rely on the information provided on the form and will not read the document to verify the accuracy or completeness of the indexing information provided herein.

AFTER RECORDING MAIL TO:

Chicago Title Company 3119 Commercial Avenue Anacortes WA 98221

SPECIAL POWER OF ATTORNEY (PURCHASE/ENCUMBER)

I, SHAREE E. FISH hereby appoint. RACHEL JOHNSON as my true and lawful attorney for me and in my name and stead, and for my use and benefit to execute promissory notes bonds, mortgages, contracts, deeds of trust and any other instruments which may be necessary or proper to purchase and/or encumber the following described real property:

Lot 27, CRANBERRY HEIGHTS PHASE II, according to the plat thereof, recorded in Volume 17 of Plats, pages 10 and 11, records of Skagit County, Washington.

Situated in Skagit County, Washington

Tax Parcel Number(s): P113568

Together with any personal property located thereon.

Giving and granting unto my said attorney in fact full authority and power to do and perform any and all other acts necessary or incident to the performance and execution of the powers herein expressly granted with power to do and perform all acts authorized hereby; as fully to all intents and purposes as the Grantor(s) might or could do if personally present.

This Special Power of Attorney will cease and be of no further effect after the 2009, or six (6) months from the date hereof, whichever first occurs.

WARNING: This power of attorney will result in another person having full right to encumber your real and personal property and obligate you to a debt. It is recommended that you obtain counsel from your attorney prior to execution of this document.

SHAREE E. FISH

STATE OF WASHINGTON COUNTY OF Skagit

I certify that I know or have satisfactory evidence that Sharee E. Fish (is/are) the person(s) who appeared before me, and said person(s) acknowledged that he/she/they signed this instrument and acknowledged it to be his/her/their free and voluntary act for the uses and purposes mentioned in this instrument.

Notary Public in and for the State of Washington Vicer Milk

Residing at Ay Ington, UA My appointment expires:

Jun 31, 2010

JENNIFER R. LEHNERT Notary Public Commonwealth of Virginia My Commission Expires Jan 31, 2010

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Skagit County Auditor

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